

APPLICATION DATA SHEET

Electronic Version v14

Stylesheet Version v14.0

Title of Invention	PLASMA-CUTTING TORCH WITH INTEGRATED HIGH FREQUENCY STARTER
<p>Application Type : regular, utility</p> <p>Attorney Docket Number : ITW7510.064</p>	
<p>Request Not To Publish</p> <p>I/We hereby request that the attached application not be published under 37 U.S.C. 122(b).</p> <p>I/We hereby certify that the invention disclosed in the attached application has not and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.</p>	
<p>Correspondence address:</p> <p>Customer Number: 33647</p> 	
<p>Inventors Information:</p> <p>Inventor 1:</p> <p>Applicant Authority Type: Inventor</p> <p>Citizenship: US</p> <p>Given Name: Tim</p> <p>Middle Name: A.</p> <p>Family Name: Matus</p> <p>Residence:</p> <p>City of Residence: San Antonio</p> <p>State of Residence: TX</p> <p>Country of Residence: US</p> <p>Address-1 of Mailing Address: 838 Fawnway</p> <p>Address-2 of Mailing Address:</p> <p>City of Mailing Address: San Antonio</p> <p>State of Mailing Address: TX</p> <p>Postal Code of Mailing Address:</p> <p>Country of Mailing Address: US</p> <p>Phone:</p> <p>Fax:</p>	

E-mail:

Inventor 2:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: Troy
Middle Name: A.
Family Name: Sommerfeld
Residence:
City of Residence: Neenah
State of Residence: WI
Country of Residence: US
Address-1 of Mailing Address: 3564 Golf Wood Drive
Address-2 of Mailing Address:
City of Mailing Address: Neenah
State of Mailing Address: WI
Postal Code of Mailing Address:
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 3:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: Joseph
Middle Name: C.
Family Name: Schneider
Residence:
City of Residence: Menasha
State of Residence: WI
Country of Residence: US
Address-1 of Mailing Address: 1618 Hickory Hollow Lane
Address-2 of Mailing Address:
City of Mailing Address: Menasha
State of Mailing Address: WI
Postal Code of Mailing Address:
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Inventor 4:

Applicant Authority Type: Inventor
Citizenship: US
Given Name: James
Middle Name: F.
Family Name: Ulrich
Residence:
City of Residence: Hortonville
State of Residence: WI
Country of Residence: US
Address-1 of Mailing Address: W9768 Cloverleaf Road
Address-2 of Mailing Address:
City of Mailing Address: Hortonville
State of Mailing Address: WI
Postal Code of Mailing Address:
Country of Mailing Address: US
Phone:
Fax:
E-mail:

Attorney Information:

practitioner(s) at Customer Number:

33647



as our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.